

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	BT		9-2-00
O.I.P.E. CLASSIFIER		5	9-8-00
FORMALITY REVIEW		16/16	10/10/00
RESPONSE FORMALITY REVIEW		11476	10/10/00

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
Final	
Original	
1	10/10/00
2	✓
3	✓
4	✓
5	✓
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11	✓
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Claim	Date
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If more than 150 claims or 10 actions  
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